

# 40<sup>th</sup> Infantry Division (M)

## Family Readiness Newsletter

1<sup>st</sup> Quarter 2005  
Volume 1, Issue 1

Family Readiness Office (562) 795-2866

### Contact Information

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### Family Assistance Center Info.

Northern California Regional  
Coordinator

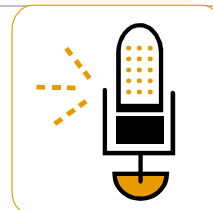
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## A Message from the Commanding General

Happy New Year!

With the start of the New Year, I want to take this opportunity to address all of you as deployed members of the Guard and your family members and tell you thank you for all that you have endured and continue to endure. It is a very challenging time for everyone but especially for those deployed. Your sacrifice is helping to improve the way of life for many less fortunate.

To the family members I especially want to say thank you. It is so difficult for you without your loved ones near. I hope that all of you are in touch with the family support group for your unit. We want to ensure that information regarding events and benefits reach all family members of our deployed soldiers. If you are having difficulties reaching your family support coordinator or you have questions that can not be answered within your group, please call Cheryl Courtright, 562-795-2866. Cheryl is my family readiness coordinator.

All of you mean a great deal to me and the leadership within our state. You are an important member of our Guard even as you serve this great nation. I wish you every success as you fulfill your mission and look forward to welcoming you back home. Thank you all for your service and your support during a very difficult time.

Major General Jeffrey Gidley  
40<sup>th</sup> Infantry Division (Mechanized)  
Commanding General



"The Family Assistance  
Network Coordinators are  
knowledgeable about  
community resources to  
assist in getting our families  
help when a crisis arises."

## Family Assistance Network Coordinators

### Northern California Coordinators:

Gail Grinius: 916-262-3168 or 916-416-8320 **E-mail:** [gail.grinius@ca.ngb.army.mil](mailto:gail.grinius@ca.ngb.army.mil)  
Debbie Skolnik: 707-576-2406 ext 107 or 707-974-8004 **E-Mail:** [Debbie.Skolnik@ca.ngb.army.mil](mailto:Debbie.Skolnik@ca.ngb.army.mil)  
Judy Shannon: 408-736-1817 or 408-595-9847 **E-Mail:** [judy.shannon@ca.ngb.army.mil](mailto:judy.shannon@ca.ngb.army.mil)  
Terri Curd: 707-437-2459 or 707-580-3319 **E-Mail:** [terri.cufte@ca.ngb.army.mil](mailto:terri.cufte@ca.ngb.army.mil)

### Central California & Central Coast Coordinators:

Melony Letson: 559-217-9976 **E-mail:** [Melony.Letson@ca.ngb.army.mil](mailto:Melony.Letson@ca.ngb.army.mil)  
Becky McPhetridge: 805-594-6431 or 805-431-0335 **E-Mail:** [Rebecca.McPhetridge@ca.ngb.army.mil](mailto:Rebecca.McPhetridge@ca.ngb.army.mil)  
Clair Ruffner: 805-238-8310 or 805-896-4029 **E-Mail:** [Clair.Ruffner@ca.ngb.army.mil](mailto:Clair.Ruffner@ca.ngb.army.mil)  
Lacy Gomez: 661-397-8795 or 661-978-7782 **E-Mail:** [Lacy.Gomez@ca.ngb.army.mil](mailto:Lacy.Gomez@ca.ngb.army.mil)

### Southern California Coordinators:

Tom Trejo: 951-377-9304 **E-Mail:** [Thomas.Trejo@ca.ngb.army.mil](mailto:Thomas.Trejo@ca.ngb.army.mil)  
Kevin Michael: 760-722-3583 or 760-455-9555 **E-Mail:** [kevin.michel@ca.ngb.army.mil](mailto:kevin.michel@ca.ngb.army.mil)  
Marco Velez: 714-231-5930 **E-Mail:** [Marco.Velez@ca.ngb.army.mil](mailto:Marco.Velez@ca.ngb.army.mil)  
Erika Wada: 818-551-2138 or 818-402-3296 **E-Mail:** [Erika.Wada@ca.ngb.army.mil](mailto:Erika.Wada@ca.ngb.army.mil)

\* Regional Coordinators are on the first page.

## Operation We Care - Community based support/informational meetings for military loved ones

**Fairfield, CA**  
4th Friday of each month @ 6.00pm  
National Guard Armory,  
510 Parker Road, Fairfield, CA  
Terri Curd @ (707) 580-3319

**Santa Rosa**  
2nd Tuesday of every month @6.30pm  
National Guard Armory  
1500 Armory Dr., Santa Rosa, CA  
Debbie Skolnik @ (707) 974-8004

**Fresno**  
Last Tuesday of every month at 7:00 P.M.  
National Guard Armory  
5575 E. Airways Blvd., Fresno CA  
Sue Miguel @ 559/ 994-6102

**Bakersfield**  
Second Tuesday of every month at 6:00 P.M.  
National Guard Armory  
1512 S. P Street, Bakersfield, CA  
Lacy Gomez @ 661/978-7782

**Long Beach**  
Last Thursday of every month at 6:00 p.m.  
National Guard Armory  
2200 Redondo Ave, Long Beach,  
Estella Wimberly @ (562) 254-6916

**Van Nuys**  
Last Wednesday of every month at 6:00 p.m.  
National Guard Armory  
7330 Victory Blvd, Van Nuys, CA  
Erika Wada @ (818) 402-3296

**Sacramento**  
4th Sunday of each month @10.00am  
Westlake Clubhouse  
4701 Westlake Prkwy, Sacramento, CA  
Gail Grinius @ (916) 416-8320

**Sunnyvale**  
3rd Saturday of each month @10.00am  
National Guard Armory  
620 E. Maude Ave, Sunnyvale, CA  
Judy Shannon @ (408) 595-9847

**Modesto**  
Last Thursday of every month at 7:00 P.M.  
National Guard Armory  
933 Kansas Ave., Modesto  
Sue Miguel @ 559/ 994-6102

**Camp San Luis Obispo**  
Third Saturday of every month at 11:00 A.M.  
Highway 1, Camp SLO, Bldg. 738  
Becky McPhetridge @ 805/ 431-0335

**Orange**  
Third Wednesday of every month at 6:00 p.m.  
Location: National Guard Armory  
365 River St, Orange, CA  
Marco Velez @ (714) 231-5930

**Riverside**  
Next meeting: Contact Tom Trejo  
National Guard Armory  
2501 Fairmont Blvd, Riverside, CA  
Tom Trejo @ (951) 377-9304

## Inside Story



TRICARE Management Activity

## News Release

### TRICARE Beneficiaries May Seek Mental Health Care If They Need It

TRICARE beneficiaries who need assistance with depression, stress-related illness, chemical dependency, alcohol abuse problems or other related issues should know that TRICARE offers a wide range of mental health care services. Access to those services, also known as behavioral health care, is easy and convenient.

Beneficiaries who require emergency mental health services should immediately seek assistance at the nearest emergency room.

It is important that beneficiaries understand the requirements for accessing this benefit. All TRICARE beneficiaries are encouraged to receive care from their military treatment facility (MTF), when available. If services are not available at the local MTF, beneficiaries may seek care from a TRICARE-authorized behavioral health provider.

Active duty service members enrolled in TRICARE Prime Remote must obtain preauthorization from the Military Medical Support Office (888-647-6676) before receiving any non-emergency mental health services.

All non-active duty beneficiaries may seek outpatient mental health services without referral or authorization for the first eight visits during a fiscal year in order to receive TRICARE coverage. When TRICARE Prime beneficiaries go beyond eight outpatient visits in any given fiscal year, they must seek referral from their primary care manager (PCM) and authorization for continuation of mental health care services from their regional contractor. Beneficiaries should check with their regional contractor to determine the process for obtaining outpatient mental health referrals and authorizations and TRICARE when seeking care for the ninth visit and beyond.

Certain outpatient services always require preauthorization including:

- psychoanalysis
  - psychological and neuropsychological testing
  - electroconvulsive therapy
  - therapy sessions in excess of one hour
- A physician referral is required prior to the initial evaluation, and oversight must continue through the course of the therapy in order for TRICARE to cover:

Continued on Next Page....



Tri-West Information  
Toll Free # 1-888-TRI-WEST  
Toll Free # 1-888-874-9378

Website: <https://www.triwest.com>

PDF Format Tri-Care Prime  
Enrollment form link:

[https://www.triwest.com/triwest/unauth/content/enrollment/tricare\\_prime\\_enrollment.pdf](https://www.triwest.com/triwest/unauth/content/enrollment/tricare_prime_enrollment.pdf)

### ARMY OneSource



CALL 24X7 FROM THE U.S.  
AT: **1-800-464-8107**

VISIT THEM ON THE WEB AT:  
[www.armyonesource.com](http://www.armyonesource.com)

User ID: army  
Password: onesource

OVERSEAS? CALL THEM AT:  
**800-4648-1077**  
OVERSEAS COLLECT:  
**484-530-5889**

Tri-Care Continued...

All beneficiaries using TRICARE are responsible for contacting their regional contractor for a listing of additional preauthorization requirements. Marriage counseling is not a TRICARE-covered benefit. Beneficiaries should seek assistance from installation or community social work services.

Inpatient mental health requirements for non-active duty beneficiaries differ based on the TRICARE coverage option. Beneficiaries enrolled in TRICARE Prime/Prime Remote require a primary care manager referral for all non-emergency inpatient mental health services. Prime beneficiaries must also ensure that inpatient mental health service in the TRICARE civilian network is preauthorized (prior to admission) and seek continued stay authorization, when appropriate. Inpatient preauthorization is also required for Standard beneficiaries.

The preauthorization and continued stay authorization requirements also apply to Residential Treatment Center care, partial hospitalization program care, and alcoholism detoxification and rehabilitation. All beneficiaries should contact TRICARE regional contractors regarding potential length-of-stay limits. TRICARE Standard beneficiaries living in an MTF catchment area must obtain a non-availability statement from their local MTF before being admitted as an inpatient for mental health services.

TRICARE for Life beneficiaries and others covered by Medicare do not require TRICARE preadmission and continued stay authorizations when Medicare is the first payer and has authorized the care. Prior to exhausting their Medicare inpatient mental health benefits, TRICARE for Life beneficiaries must contact their TRICARE contractor to obtain a continued stay authorization.

To be safe, beneficiaries should check with their regional contractor in advance of seeking non-emergency mental health care to ensure that authorization is not required. Regional contractor contacts are available at [www.tricare.osd.mil](http://www.tricare.osd.mil).

One Source, a military Web-based information service for active duty service members and their families, also provides Service-specific information regarding mental health care support programs. One Source can be reached by telephone or through the Web site for each service: One Source, a military Web-based information service for active duty service members and their families, also provides Service-specific information regarding mental health care support programs. One Source can be reached by telephone or through the Web site for each service:

- o Army One Source at (800-464-8107) or [www.armyonesource.com](http://www.armyonesource.com) (user name: army; password: onesource)



*"Some have referred to self-esteem as merely 'feeling good' or having positive feelings about oneself."*

## THE TRUE MEANING OF SELF-ESTEEM

by Robert Reasoner

Educators, parents, business and government leaders agree that we need to develop individuals with healthy or high self-esteem characterized by tolerance and respect for others, individuals who accept responsibility for their actions, have integrity, take pride in their accomplishments, who are self-motivated, willing to take risks, capable of handling criticism, loving and lovable, seek the challenge and stimulation of worthwhile and demanding goals, and take command and control of their lives. In other words, we need to help foster the development of people who have healthy or authentic self-esteem because they trust their own being to be life affirming, constructive, responsible and trustworthy.

Unfortunately, efforts to convey the significance and critical nature of self-esteem have been hampered by misconceptions and confusion over what is meant by the term "self-esteem." Some have referred to self-esteem as merely "feeling good" or having positive feelings about oneself. Others have gone so far as to equate self-esteem with egotism, arrogance, conceit, narcissism, a sense of superiority, a trait leading to violence. Such characteristics cannot be attributed to authentic, healthy self-esteem, because they are actually defensive reactions to the lack of authentic self-esteem, which is sometimes referred to as "pseudo self-esteem."

Individuals with defensive or low self-esteem typically focus on trying to prove themselves or impress others. They tend to use others for their own gain. Some act with arrogance and contempt towards others. They generally lack confidence in themselves, often have doubts about their worth and acceptability, and hence are reluctant to take risks or expose themselves to failure. They frequently blame others for their shortcomings rather than take responsibility for their actions.

A close relationship has been documented between low self-esteem and such problems as violence, alcoholism, drug abuse, eating disorders, school dropouts, teenage pregnancy, suicide, and low academic achievement. However, it has been difficult to isolate it as a primary cause using traditional experimental research methods, for it is usually only one of several contributing factors. What needs to be stressed is that self-esteem is a critical component of any program aimed at self-improvement or any rehabilitation program, for it is one of the few solutions that offers hope to correcting these problems. Many prisons, for example, have now introduced self-esteem programs to reduce recidivism.

One of the difficulties in trying to reach agreement on the nature of self-esteem is due to the fact that it has been approached from several different perspectives. Some have seen it as a psychodynamic, developmental process; others have approached it from the perspective of the cognitive-behaviorist in terms of various coping strategies; others have viewed it from the position of a social psychologist in terms of attitudes, while others have focused on the experiential dimensions of self-esteem as a humanistic psychologist. Since self-esteem has both psychological and sociological dimensions, this has made it difficult to come up with a comprehensive definition, and rarely have both dimensions been taken into consideration together in conducting research studies.

There is, however, general agreement that the term self-esteem includes cognitive, affective, and behavioral elements. It is cognitive as one consciously thinks about oneself as one considers the discrepancy between one's ideal self, the person one wishes to be, and the perceived self or the realistic appraisal of how one sees oneself. The affective element refers to the feelings or emotions that one has when considering that discrepancy. The behavioral aspects of self-esteem are manifested in such behaviors as assertiveness, resilience, being decisive and respectful of others. Thus, self-esteem is difficult to define because of these multiple dimensions. In addition, although self-esteem is generally stable, it can fluctuate from time to time, a phenomenon which is referred to as global versus situational self-esteem, and which can make measuring or researching self-esteem very difficult.

It is important that the significance of self-esteem not be lost in the confusion over what it means. Nathaniel Branden, Ph.D., a well known psychotherapist, defined self-esteem several years ago as "The disposition to experience oneself as being competent to cope with the basic challenges of life and of being worthy of happiness." The National Association for Self-Esteem modified this to define self-esteem as "The experience of being capable of meeting life's challenges and being worthy of happiness." Christopher Mruk, Ph.D., a psychology professor at Bowling Green University, reports in his book *Self-Esteem: Research, Theory, and Practice* that of all the theories and definitions proposed, this description of self-esteem has best withstood the test of time in terms of accuracy and comprehensiveness.

## Lateral Thinking

You can try solving this puzzle on your own -- that's certainly a legitimate way to go about this -- but usually you can have more fun if you involve other people. The way it works is, you look at the answer (maybe you want to try the puzzle on your own first!), then read just the clues to your friends. Your friends must determine the answer by asking questions about it, which you may answer only with "yes," "no," or the occasional "doesn't matter." The neat thing about this is that you can adjust the difficulty of the puzzle by varying the number of initial clues, throwing in red herrings, and so forth.

### Puzzle:

**A man lives on the twelfth floor of an apartment building. Every morning he takes the elevator down to the lobby and leaves the building. In the evening, he gets into the elevator, and, if there is someone else in the elevator -- or if it was raining that day -- he goes back to his floor directly. Otherwise, he goes to the tenth floor and walks up two flights of stairs to his apartment.**

**Answer is at the end of the newsletter.**

## Guard Family Action Plan Kicks Off

The Guard Family Action Plan (GFAP) Web site ([www.gfap.org](http://www.gfap.org)) is now operational! The GFAP is designed to improve programs, benefits, and entitlements for families within the National Guard community. The GFAP is a standardized management tool that allows for the monitoring of the process by which Guard family issues are gathered, submitted, and resolved. Ultimately, the GFAP will increase family self-reliance and thereby promote individual, family, and unit readiness and well-being.

## Scholarship Opportunities for Military Spouses

**Source:** National Military Family Association

**Contact:** Kathleen Burke

703-931-6632

[www.nmfa.org](http://www.nmfa.org)

ALEXANDRIA, VA, January 13, 2004. — The National Military Family Association (NMFA) is excited to announce that applications are now being accepted for the NMFA's Joanne Holbrook Patton Military Spouse Scholarship Program. The scholarships are awarded to Uniformed Services spouses (active, retired, reserve, guard or survivor) to obtain professional certification or to attend post-secondary or graduate school for an academic year.

Scholarships are normally in the amount of \$1,000.00. The scholarship funds may be used to assist with tuition, fees, books, and school room and board, so long as the funds are paid directly to the educational institution involved. The 2005 Awards were made possible through a donation from General Dynamics and several individual donors. Applications are only accepted online and are due on March 31, 2005. NMFA recognizes that the military lifestyle presents unique challenges to military spouses. Frequent moves can interfere with military spouses' ability to complete their post-secondary education, thus negatively impacting their professional development and long-term career progression. NMFA's military spouse scholarship program is one step toward helping military spouses gain the education that they need to reach their full career potential.

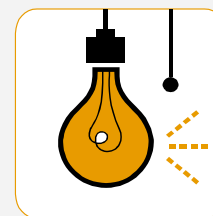


GUARD FAMILY ACTION PLAN



### Guard Family Action Plan

<http://www.gfap.org/>



*"The GFAP is designed to improve programs, benefits, and entitlements for families within the National Guard community."*



Guard Family Team Building

<http://www.gftb.org/>

**40<sup>th</sup> Infantry Division (M)  
Family Readiness Office**  
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[Cheryl.Courtright@ca.ngb.army.mil](mailto:Cheryl.Courtright@ca.ngb.army.mil)

## Lateral Thinking Puzzle Solution

The man is a midget. He can't reach the upper elevator buttons, but he can ask people to push them for him. He can also push them with his umbrella.

Lateral Thinking Puzzles, unlike most puzzles, are inexact puzzles. In a sense, they are a hybrid between puzzles and storytelling -- the ratio of one to the other is determined by how you go about solving them.

In each puzzle, some basic clues to a realistic scenario are given, but the clues don't tell the multiple solutions full story. Your job is to fill in the details and have the resulting scenario make sense. Obviously, there is usually more than one answer to any given puzzle, but, in general, only the solution given is truly satisfying. (In some cases, are given.)

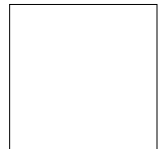
## About Our Organization

The Family Readiness Office of the 40<sup>th</sup> Infantry Division is operated by a volunteer and two full time Military Points of Contact.

We exist to help Family Readiness Coordinators of all levels, Military Points of Contact and Rear Detachments to work together and keep families informed, educated, and empowered before, during and after deployment. We are your advocates here at the 40<sup>th</sup> Infantry Division (M).

For information on educational training opportunities or assistance, please contact our office.

**40<sup>TH</sup> INFANTRY DIVISION (M)  
OFFICE OF FAMILY READINESS**  
4480 YORKTOWN AVENUE  
BLDG. 3, ROOM 134A  
LOS ALAMITOS, CA 90270



**We're on the Web!**  
See us at:  
<http://www.calguard.ca.gov/40div/FamilySupport/default.htm>